Fees Read 50C5 Complianco IN.



Department of Environmental Protection

Jeb Bush Governor Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

David B. Struhs Secretary

August 1 2001

Mr. George F. Allen Allen's Laundry and Dry Cleaning Post Office Box 656 Keystone Heights, Florida 32656

Re: Facility No.: 0190042-002

Dear Mr. Allen:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 19, 2001.

Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements of the Title V general permit.

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

Title V General Permits Office
Bureau of Air Monitoring and Mobile Sources MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,

Dotty Diltz, Chief

Bureau of Air Monitoring and Mobile Sources

DD/jw

cc: Mr. Rick Banks, Northeast District

"More Protection, Less Process"

Printed on recycled paper.

Coll

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location		
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):		
George E Allen Inc.		
2. Site Name (For example, plant name or number):		
Allen's Laundry + Dry Cleaning 3. Hazardous Waste Generator Identification Number:		
FLD 111-0383 4. Facility Location: 7385 State Road		
4. Facility Location: 7385 State Road	21	
Street Address: City: Klystone Heights County: Cla	Y Zip Code: 32656	
5: Facility Identification Number (DEP Use ONLY do no	enationalian terratary. Therefore investigation are depresented to the area and an area of the ar	
The second of th		
Responsible Official Nome and Title of Responsible Officials		
6. Name and Title of Responsible Official: Name:	Title: Outpack	
Name: George F. Allen	1 Owner	
7. Responsible Official Mailing Address: Organization/Firm:		
Street Address: V.D. Box 656		
City: Keystone Heights County: Clay	Zip Code: 32656	
8. Responsible Official Telephone Number:	<u> </u>	
Telephone: (352) 473-3778	Fax: (352) 473-7477#1	
Facility Contact (If different from Responsible Official)		
9. Name and Title of Facility Contact (For example, plant i	manager):	
	•	
10. Facility Contact Address:	١.	
Street Address:	:	
City: County:	Zip Code:	
11. Facility Contact Telephone Number: Telephone: () -	Fax: () -	
, , , , , , , , , , , , , , , , , , , ,	,	

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY					
How many dry-to-dry ma	chines do you hav	e on-site?			
For each dry-to-dry mach	For each dry-to-dry machine on-site, please provide the following information:				
Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")		
July 1995	Existing/Ne	RC/CA/None required	Same		
	Existing/Ne	w RC/CA/None required	(a) (<u>b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a</u>		
	Existing/Ne	w RC/CA/None required			
*CONTROL DEVICE K	EY: RC = re	frigerated condenser CA =	= carbon adsorber		
1.(b) TRANSFER MAC	HINES ONLY	modern Salver Sylven			
How many washers do yo	ou have on-site?		The contract of the contract o		
How many dryers/reclain	ners do you have o	n-site?			
unit. If the transfer machi 1993, it is a NEW unit (n	ne was purchased to units purchased	from the manufacturer between	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, owed to operate under this general formation: Date Control Device Installed (if already included at time of purchase, write "SAME")		
	Existing/New	RC/CA/None required			
	Existing/New		production of the second		
<u>, </u>	Existing/New	RC/CA/None required	· <u>·</u>		
*CONTROL DEVICE K	EY: RC = re	frigerated condenser CA =	≈ carbon adsorber		
م ار	roethylene (perc) h	nave you used within the last 12 this in)	nonths?		
(b) If less than 12 mor	iths, how many? [months			
		New owner: Did not ke	ep records: []		
,		New store: New machin	. —		
		Unopened store [] (date of			

DEP Form No. 62-213.900(2)

Effective: 2/24/99

What is the facility's source classification based or Indicate with an "X". Select one classification or				
Small Area Source	•			
Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site	(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)			
Large Area Source				
Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)			
4. What control technology is required on machines (Indicate with an "X".)	pursuant to section (5) of Part II of this notification form?			
Existing machines at small area source (NONE REQUIRED)	New machines at small area source Refrigerated condenser [
Existing machines at large area source Carbon adsorber Refrigerated condenser	New machines at large area source Refrigerated condenser			
5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).				
All steam and hot water generating units exempt No such units on-site	OR			
How many boilers do you have on-site?				
For each boiler, indicate its horsepower (HP) rating: [] []				
What type of fuel do you use? [] propane [] No. 2 fuel [] No. 6 fuel	·			
6. Equipment Monitoring and Recordkeeping Inform	aation			
Check all logs which are required to be kept on-site	in accordance with the requirements of this general permit:			
(a) Purchase receipts and solvent purchases/solvent addition log				
(b) Leak detection inspection and repair				
(c) Refrigerated condenser temperature monitoring				
(a) Purchase receipts and solvent purchases/solvent addition log (b) Leak detection inspection and repair (c) Refrigerated condenser temperature monitoring (d) Carbon adsorber exhaust perc concentration monitoring (e) Startup, shutdown, malfunction plan				
(e) Startup, shutdown, malfunction plan				

DEP Form No. 62-213.900(2)

Effective: 2/24/99

RECEIVED

JUN 1 9 2001

7. Surrender o	f Existing DEP Air Permit(s) Bureau of Air Monitoring			
Please indicate	e with an "X" the appropriate selection:			
	I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are			
ιχι	No DEP air permits currently exist for the operation of the facility indicated in this notification form.			
Responsible Official Certification				
I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form. I will promptly notify the Department of any changes to the information contained in this notification. Peare F. Aller Print name of responsible official				
Signature	Date 6-14-01			

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Grant, Patricia

From:

Thomas, Bruce X.

Sent:

Tuesday, September 20, 2005 2:30 PM

To:

Grant, Patricia

Cc:

Bowman, Sandy

Subject: FW:

0190042 has been changed to inactive. 0790019 had already been changed to inactive.

----Original Message-----**From:** Worley, Michelle

Sent: Tuesday, September 20, 2005 1:22 PM

To: Thomas, Bruce X.

Subject: RE:

no problem, also did you receive a letter from the owner of Modern cleaner (0790019) stating they were closed, and also one from Allen's (0190042) that they had sold the business as of Aug. 31?

Michelle M. Worley

Environmental Specialist
Department of Environmental Protection
Northeast District
7825 Baymeadows Way, Suite B200
Jacksonville, Fl 32256-759
Michelle.Worley@dep.state.fl.us
904-807-3256
5C 804-3256

-----Original Message-----From: Thomas, Bruce X.

Sent: Tuesday, September 20, 2005 2:20 PM

To: Worley, Michelle

Subject: RE:

We received a notification form from the new owner that became effective 9/1 so I changed the status back to active. Thank you for keeping me honest though! Bruce

-----Original Message-----From: Worley, Michelle

Sent: Tuesday, September 20, 2005 12:59 PM

To: Thomas, Bruce X.

Subject: RE:

I was checking to make sure all inspections were done and Dykes came up as active even though you had sent me the previous message.

Michelle M. Worley

Environmental Specialist

Department of Environmental Protection

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

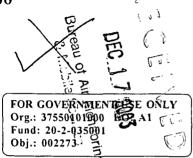
434330 DEC15 2003

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

190042 GEORGE ALLEN ALLEN'S LAUNDRY & DRY CLEANING P. O. BOX 656 KEYSTONE HEIGHTS FL 32656



443618 DEG 2004

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

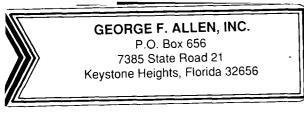
Do NOT Remove Label

AIRS ID# 190042 10
ALLEN'S LAUNDRY & DRY
CLEANING
7385 State Road 21
KEYSTONE HEIGHTS, FL 32656

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1

FUND: 20-2-035001 OBJECT: 002273

Printed on recycled paper.





TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

32315+3070 Infinidational datable for the first of the fi

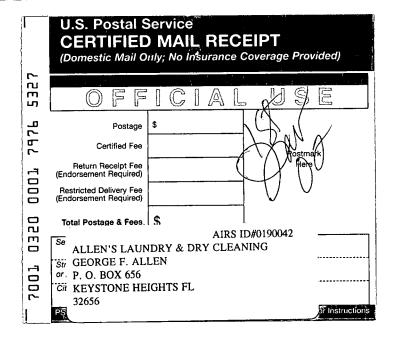
422873 FEB12 2003
Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

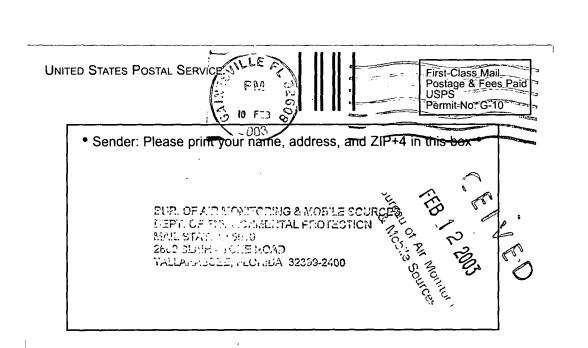
Do NOT Remove Label

AIRS ID#0190042
ALLEN'S LAUNDRY & DRY CLEANING
GEORGE F. ALLEN
P. O. BOX 656
KEYSTONE HEIGHTS FL
32656

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001 Obj.: 002273



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	Addressee		
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:		
AIRS ID#0190042 ALLEN'S LAUNDRY & DRY CLEANING GEORGE F. ALLEN P. O. BOX 656 KEYSTONE HEIGHTS FL 32656			
	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		
	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number (Copy from service 7001, 0320, 0001, 7976, 5,327			
PS Form 3811, July 1999 Domes	tic Return Receipt 102595-99-M-1789		





TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

32315+3070 33

TOTAL AMOUNT DUE: \$50,00

412323 DEC27 2001

Do NOT Remove Label

AIRS ID # 0190042

ALLEN'S LAUNDRY & DRY CLEANING GEORGE F. ALLEN P. O. BOX 656 KEYSTONE HEIGHTS FL 32656

lallandadhadhadhdhadadhadhadhadhadhad

& Mobilings 3755690irogo EO: A1 Fund: 2502835001